

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	8/2/01
FORMALITY REVIEW	K.S.	116	09/18/01
RESPONSE FORMALITY REVIEW	CK	1109	4-17-02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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38	✓
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Claim	Date
Final Original	
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Claim	Date
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